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APPLICATION NO.	PLICATION NO. FILING DATE		FIRST NAM		ENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/587,764	10/587,764 07/28/2006			Helerson Kemme		3770 2112				
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APPLN. TYPE	SMALL ENTITY		FEE DUE PUBLICATION FE		DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	ovisional NO		0	\$300		\$0		\$1810	02/17/2009	
EXAM	ART UNIT		CLASS-SUBCLASS							
VILAKAZI, SIZO BINDA 3747				123-490000						
<ul> <li>1. Change of correspondence address or indication of "Fee Address" (37, CFR 1.363).</li> <li>1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>1. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.</li> </ul>				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Michael J. Striker  2  3						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRIN	TED ON	THE PATENT (print o	or type	e)	, .	1 1 1 1		
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no eletion of this f	o assignee form is NO	data will appear on t T a substitute for filin	the pa g an a	tent. If an assigr ssignment.	iee is io	dentified below, the do	ocument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Robert Bosch GmbH Stuttgart, Germany										
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💘 Corporation or other private group entity 🗀 Government										
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